

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2009

10/601219

CLAIMS AS FILED - PART I

SMALL ENTITY

OTHER THAN

TYPE ☐

OR SMALL ENTITY

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
XS18=	
X86=	
+290=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

SMALL ENTITY

OR OTHER THAN

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

AMENDMENT A	(Column 1)	CLAIMS REMAINING AFTER AMENDMENT		(Column 2)	HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3)	PRESENT EXTRA
	Total	• 27	Minus	-- 29	=		
	Independent	• 2	Minus	--- 4	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

AMENDMENT B	(Column 1)	CLAIMS REMAINING AFTER AMENDMENT		(Column 2)	HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3)	PRESENT EXTRA
	Total	•	Minus	--	=		
	Independent	•	Minus	---	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

AMENDMENT C	(Column 1)	CLAIMS REMAINING AFTER AMENDMENT		(Column 2)	HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3)	PRESENT EXTRA
	Total	•	Minus	--	=		
	Independent	•	Minus	---	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3

** If the Highest Number Previously Paid For in THIS SPACE is less than 10, enter "10"

*** If the Highest Number Previously Paid For in THIS SPACE is less than 3, enter "3"

The Highest Number Previously Paid For in THIS SPACE is the highest number of claims previously paid for in THIS SPACE